**Division of Corporations** Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name

: C T CORPORATION SYSTEM

Account Number : FCA000000023

Phone

: (614)280-3338

Fax Number

: (954)208-0845

JAN 31 2011

R. WHITE Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:

## REGISTERED AGENT CHANGE HERON INVESTMENTS, INC.

Certificate of Status	0
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## **COVER LETTER**

TO:	Amendment Section Division of Corporations
SUBJ	HERON INVESTMENTS, INC.
	Name of Corporation
DOC	P99000095486 UMENT NUMBER:
The e	nclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
	e return all correspondence concerning this matter to the following:
	Name of Contact Person
	Firm/Company
	Address
	City/State and Zip Code
	hillary.johnson@fivestonetax.com
	E-mail address: (to be used for future annual report notification)
For fi	urther information concerning this matter, please call:
	Name of Contact Person at (
Enclo	sed is a \$35,00 check made payable to the Department of State.
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327  Street Address: Amendment Section Division of Corporations Clifton Building

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

CR2E045 (03/12)

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0 statement of change is submitted for a corporation org in order to change its registered office or regis	anized under the laws of the State of Florida			
1.The name of the corporation: IIERON INVESTMENT	rs, inc.			
2. The principal office address: 28 S. EXUMA RD., KE	Y LARGO. FL 33037			
3.The mailing address (if different):				
4.Date of incorporation/qualification: 10/29/1999 Document number: P99000095486				
5. The name and street address of the current registered Florida Department of State: (If resigned, enter resigned)				
EASTWOOD MANAGEMENT, INC				
28 S. EXUMA RD.				
KEY LARGO, FL 33037	7			
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):				
C T Corporation System				
c/o C T Corporation System, 1200 South Pine Island Road				
P.O. Box No Plantation, Florida 33324	OT acceptable			
The street address of its registered office and the street as changed will be identical.	ct address of the business office of its registered agent,			
Such change was authorized by resolution duly adopt authorized by the board, or the corporation has been	ed by its board of directors or by an officer so notified in writing of the change.			
Deborah S. Gates Signature for in officer or director	Deborah S. Yates, Director  Printed or typed name and title			
I hereby accept the appointment as registered agent of further agree to comply with the provisions of all stoperformance of my chities, and I am familiar with ana agent. Or, if this document is being filed merely to rehereby confirm that the corporation has been notified	and agree to act in this capacity. alutes relative to the proper and complete			
C T Corporation System  3y: One Wing and 101/20/2017				
By: Osnifar Vincent Signature of Registered Agent	Date			
If signing on behalf of an entity:				
Jenifer Vincent, VP and Asst, Secretary  Typed or Printed Name				
* * * FILING F	FEE: \$35.00 * * *			

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (03/12)